



# WINDSOR NORTH SCHOOL STUDENT ENROLMENT FORM

91 Chelmsford Street  
Invercargill  
P: 03 217 8819  
E: office@windsornorth.school.nz

STUDENT DETAILS			
Preferred Surname:		Preferred First Name:	
Legal Surname:		Legal First Name/s:	
Address:		Gender:	Date of Birth:
Suburb:		Previous School:	Current Year Level:
City:	Postcode:	NZ Residency:	Date of NZ entry:
Country of Birth:	Home Language:	Citizenship:	Student Visa Number:
Name of sibling currently at this school:			Ethnicity:
Name of sibling formerly at this school & their DOB:			Iwi/Hapu 1:
Name of parent formerly at this school & their DOB:			Iwi/Hapu 2:
PARENTS / CAREGIVERS DETAILS			
CAREGIVER 1			
Mr/Mrs/Miss/Ms	First Name:	Surname:	Relationship to student:
Address:			Country of birth:
Mobile:		Home Ph:	Work Ph:
Email:			Employer:
			Occupation:
CAREGIVER 2			
Mr/Mrs/Miss/Ms	First Name:	Surname:	Relationship to student:
Address:			Country of birth:
Mobile:		Home Ph:	Work Ph:
Email:			Employer:
			Occupation:
EMERGENCY CONTACTS <i>(other than parent/caregivers - 2 required please)</i>			
Name 1:		Relationship to student:	Mob: Hom:
Name 2:		Relationship to student:	Mob: Hom:
Doctor Name:		Doctor Ph:	
CUSTODY ACCESS			
Name/s of legal guardian/s:			Court order issues? Yes / No / NA
Details: (attach further information as required)			
Extra copy of school report to:		Address:	
FAMILY MEMBERS			
Members of your family likely to be attending this school in the future:			
Name:		Date of birth: / /	Gender: M / F
Name:		Date of birth: / /	Gender: M / F
Name:		Date of birth: / /	Gender: M / F
OFFICE USE ONLY			
Birth date verification: <input type="checkbox"/> Birth certificate/number: or <input type="checkbox"/> Passport/number:			Date of entry:
Received: Address Confirmation/Birth Certificate or Passport/Immunisation/In Zone Waiver			School admission no:
Gmail account name:		Edge Library user set up: Y / N	INZ - In zone
Parent App invitation sent:		ESOL:	INZ - In zone sibling current student in
NSN:		Teacher:	INZ - Out zone sibling current who was in
House:		Year Level:	Room:
Leaver Details			OUT - Out of zone
Last day at WNS:			OUT - Out of zone sibling current out
School transferred to:			OUT - Out of zone sibling former student
City:		OUT - Out of zone child former student	
Additional Information:			

Continued overleaf

MEDICAL	
New Entrants: Has your child had a B4 School Check? Y / N	Is your child fully immunised? Y / N
Does your child have any of the following health concerns? <i>Please supply the school with a copy of your child's immunisation record</i>	
Asthma Y / N	Sight Problems Y / N
Allergies Y / N	Hearing Problems Y / N
Serious Health Conditions Y / N	Medication Taken Y / N
Details:	Details:
Details of any other medical concerns if necessary:	
I consent to my child's vision and hearing being tested: Y / N	<i>Attach further information as required</i>

EARLY CHILDHOOD EDUCATION – NEW ENTRANTS ONLY			
Was ECE regularly attended? <input type="checkbox"/> Yes, for the last _____ year/s	Name of service attended:		
<input type="checkbox"/> Not regularly, only occasionally or with non on-going schedule	<input type="checkbox"/> No, did not attend ECE		
Please enter the number of hours per week for up to three services (a-f) or tick the appropriate box (g-j)	ECE 1 (hrs/wk)	ECE 2 (hrs/wk)	ECE 3 (hrs/wk)
a) Kohanga Reo			
b) Playcentre			
c) Kindergarten or Education and Care Centre			
d) Home based service			
e) Playgroup			
f) Correspondence School – Te Aho o Te Kura Pounamu			
g) Attended, but only outside New Zealand			

CULTURAL CONSIDERATIONS
Are there any cultural considerations that we need to be made aware of to support your child's learning?

PERMISSION TO PARTICIPATE	
Please read the information below and write Yes or No beside each to indicate whether or not you give permission:	Yes or No
<b>EDUCATION OUTSIDE THE CLASSROOM (EOTC)</b> Throughout each school year Windsor North School children will be involved in a variety of activities, which come under the category of education outside the classroom. This will include supervised class trips and visits, cultural events, sports trips and camps. Some of these events will include transport via bus.	
<b>PHOTOGRAPHS/VIDEOS</b> Children at Windsor North School use video and photography as part of learning. Your child's photo/video may be on one of these formats and may be seen by others. It may also be used on our school website, Facebook, ClassDojo and/or in promotional material.	
<b>INTERNET SAFETY</b> Children's learning involves the use of the internet and email. Our School Internet/Email Procedures state that the use of internet/email facilities at Windsor North School be strictly for educational purposes. All students must follow the Student Internet/E-mail Use Agreement below and by signing this form you give your permission for your child to use the internet/email at school. <b>Student Internet/Email Use Agreement</b> As users of the Windsor North School computer network students agree to: <ul style="list-style-type: none"> <li>use the internet/email only in accordance with the School Internet/Email Procedures;</li> <li>use the internet/email only with the permission of a teacher, and with a teacher present while online, including before or after school;</li> <li>never deliberately visit any site that is in any way inappropriate for their age or purpose;</li> <li>always use the computer in an appropriate manner.</li> </ul> Please note that our school internet is monitored by Network for Learning who are a Ministry of Education approved filter agency.	

IN-ZONE ENROLMENTS
I confirm that the address which I have provided to the school will be the usual place of residence of my child when the school is open for instruction. I understand that this enrolment will be confirmed once evidence of my in zone address has been provided. I will advise the school of any subsequent change of address. Please refer to the in-zone usual place of residence form, <b>Please write Yes or N/A.</b>

PRIVACY STATEMENT
<i>The information collected will be used by the school for enrolment and forms an essential part of the information held by the school on your child. The records made from this information may be viewed on request at the school. The information collected may be disclosed to appropriate education, health and welfare authorities and for data gathering purposes by the New Zealand Ministry of Education, in accordance with the principles of the Privacy Act. It will not be disclosed to any other person or agency unless such disclosure is authorised by law. Some of this data is stored in a nationwide database called ENROL. The information held in ENROL is collected under the authority of section 237 of the Education and Training Act 2020 (the Act). The Ministry of Education is responsible for the management and storage of the information held in ENROL and uses ENROL information in accordance with the Act and the Privacy Act 2020. Further information about this can be found here: <a href="https://parents-live-storage-stack-a8-assets.s3.amazonaws.com/public/Documents/Primary-School/Electronic-Information-about-your-child.pdf">https://parents-live-storage-stack-a8-assets.s3.amazonaws.com/public/Documents/Primary-School/Electronic-Information-about-your-child.pdf</a> <b>Parent approvals:</b> I agree that the school will take action on my behalf in case of sudden illness or injury, to abide by the school's policies, that my child's work and image may be used in accord with the school's online publishing policy/procedures and that the school may forward my child's name and address to a potential intermediate or secondary school.</i>

Parent/Caregiver Signature: 	Date:
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## IN-ZONE USUAL PLACE OF RESIDENCE

To be completed by parents who have given an in-zone address as the student's usual place of residence.

The address given at the time of application for enrolment must be the student's usual place of residence when the school is open for instruction. *This means that if you currently live at an in-zone address but move to an out-of-zone address before your child's first day of attendance at the school, your child will not be entitled to enrol at the school.*

The Ministry of Education has advised that parents should also be warned of the possible consequences of deliberately attempting to gain unfair priority in enrolment by knowingly giving a false address or making an in-zone living arrangement which they intend to be only temporary e.g.

- renting accommodation in-zone on a short-term basis;
- arranging temporary board in-zone with a relative or family friend;
- using the in-zone address of a relative or friend as an "address of convenience", with no intention to live there on an ongoing basis.

Before enrolment takes place (i.e. before attendance begins), if the board has reasonable grounds for believing that the given in-zone address will not be a genuine, on-going living arrangement, the board may withdraw any offer of a place which it may have made on the basis of the given address.

Within the first 6 months after attendance has begun, if the school learns that a student is no longer living at the in-zone address given at the time of application for enrolment and has reasonable grounds to believe that a temporary in-zone residence has been used for the purpose of unfairly gaining priority in enrolment at the school, then the board may review the enrolment. Unless the parents can give a satisfactory explanation within 10 days, the board may annul the enrolment. This course of action is provided for under section 110A of the Education Act 1989.

*I confirm that the address which I have provided will be the usual place of residence of my child when the school is open for instruction. I will advise the school of any subsequent change of address. I understand that this enrolment will be confirmed once the following evidence of my in zone address, in my name, has been provided to the school.*

*Please tick which evidence of address has been provided:*

- Current electricity account  
 Tenancy agreement with bond receipt  
 Electricity connection email (to be followed up with first electricity account)

Child's Name:			
Parent's Name:			
Address:			
Parent's Signature:		Date:	